



# City of Seattle

## Ethics & Elections Commission

### **DISCLOSURE of Appearance of Conflict or Impaired Judgment** **SMC 4.16.070.1.c**

Name (please print):	
Title:	
Description of the Official Action:	
I publicly disclose the following facts, which a reasonable person could believe would impair my independence of judgment on the Action described above:	
Signature:	
Date:	

Please call the Seattle Ethics and Elections Commission at 684-8500 with any questions you have about completing this form.

Attach additional pages if necessary.